

**GENERAL EXCISE/USE, EMPLOYER'S  
WITHHOLDING, TRANSIENT ACCOMMODATIONS  
AND RENTAL MOTOR VEHICLE &  
TOUR VEHICLE SURCHARGE  
APPLICATION CHANGES**

**IMPORTANT: File this form ONLY if there are changes to your license application (Form BB-1).**

Taxpayer's Name \_\_\_\_\_ GE/WH/TA/RV I.D. No. \_\_\_\_\_

**PLEASE CHANGE MY:**

1. ☐ NAME TO: ( ) \_\_\_\_\_

Does not include change of ownership. (e.g., if a new FEIN is required, a new license must be obtained.) Reason for name change.

2. ☐ Doing Business As (DBA) Name: ( ) \_\_\_\_\_

Does not include change of ownership. (e.g., if a new FEIN is required, a new license must be obtained.)

3. ☐ TELEPHONE NUMBER TO: Business ( ) \_\_\_\_\_ Residential ( ) \_\_\_\_\_

4. ☐ ACCOUNTING PERIOD TO: ☐ Calendar Year ☐ Fiscal year ending \_\_\_\_ / \_\_\_\_ As of \_\_\_\_\_

5. ☐ ACCOUNTING METHOD TO: ☐ Accrual ☐ Cash As of \_\_\_\_\_

6. ☐ **GENERAL EXCISE** FILING PERIOD:

**From:**

- ☐ Monthly  
☐ Quarterly  
☐ Semi-annually

**To:**

As of \_\_\_\_\_

- ☐ Monthly (Annual tax exceeds \$4,000.)  
☐ Quarterly (Annual tax does not exceed \$4,000.)  
☐ Semi-annually (Annual tax not more than \$2,000.)

7. ☐ **WITHHOLDING** FILING PERIOD:

**From:**

- ☐ Monthly  
☐ Quarterly

**To:**

As of \_\_\_\_\_

- ☐ Monthly (Annual tax exceeds \$5,000.)  
☐ Quarterly (Annual tax does not exceed \$5,000.)

8. ☐ **TRANSIENT ACCOMMODATIONS** FILING PERIOD:

**From:**

- ☐ Monthly  
☐ Quarterly  
☐ Semi-annually

**To:**

As of \_\_\_\_\_

- ☐ Monthly (Annual tax exceeds \$4,000.)  
☐ Quarterly (Annual tax does not exceed \$4,000.)  
☐ Semi-annually (Annual tax not more than \$2,000.)

9. ☐ **RENTAL MOTOR VEHICLE & TOUR VEHICLE SURCHARGE** FILING PERIOD:

**From:**

- ☐ Monthly  
☐ Quarterly  
☐ Semi-annually

**To:**

As of \_\_\_\_\_

- ☐ Monthly (Annual tax exceeds \$4,000.)  
☐ Quarterly (Annual tax does not exceed \$4,000.)  
☐ Semi-annually (Annual tax not more than \$2,000.)

**PLEASE ADD:**

10. ☐ FEDERAL EMPLOYER I.D. NO. \_\_\_\_\_

(If your FEIN has changed, you must apply for a new license. This line is ONLY for those applicants who did not have a FEIN at the time the original application was filed.)

11. ☐ PARENT CORPORATION'S: FEIN \_\_\_\_\_ G.E. I.D. NUMBER \_\_\_\_\_

12. ☐ NEW PARTNERS OR CORPORATE OFFICERS (List on back of this form.)

13. ☐ NEW BUSINESS ACTIVITY \_\_\_\_\_

14. ☐ ADDRESS(ES) OF YOUR RENTAL REAL PROPERTY, RENTAL MOTOR VEHICLE AND/OR TOUR BUSINESS,  
AND TRANSIENT ACCOMMODATIONS. (List on back of this form.)

15. ☐ DBA (Doing Business As) Name \_\_\_\_\_

16. ☐ MY SPOUSE: Name \_\_\_\_\_ SSN \_\_\_\_\_

**MAILING  
ADDRESSES**

OAHU DISTRICT OFFICE  
P.O. BOX 1425  
HONOLULU, HI 96806-1425

MAUI DISTRICT OFFICE  
P.O. BOX 1427  
WAILUKU, HI 96793-6427

HAWAII DISTRICT OFFICE  
P.O. BOX 937  
HILO, HI 96721-0937

KAUAI DISTRICT OFFICE  
P.O. BOX 1687  
LIHUE, HI 96766-5687

**PLEASE DELETE:**

17. ☐ PARTNERS OR CORPORATE OFFICERS. (List on back of this form.)

18. ☐ BUSINESS ACTIVITY \_\_\_\_\_

19. ☐ ADDRESS(ES) OF YOUR RENTAL REAL PROPERTY, RENTAL MOTOR VEHICLE AND/OR TOUR BUSINESS,  
AND TRANSIENT ACCOMMODATIONS. (List on back of this form.)

20. ☐ DBA (Doing Business As) Name \_\_\_\_\_

21. ☐ SPOUSE: Name \_\_\_\_\_ SSN \_\_\_\_\_

Signature

Print name and Title (Owner, Partner or Member, Officer, or Duly Authorized Agent)

Date

[illegible]